



MARINE SAFETY PROGRAM

BOAT LIVERY INSPECTION SUMMARY

This information is required by authority of Part 445, 1994 PA 451, as amended.

Inspection Year
County

TOTAL NUMBER OF PLATES FURNISHED TO COUNTY	TOTAL NUMBER OF PLATES ON HAND	TOTAL NUMBER OF PLATES VOIDED, DESTROYED, OR LOST
SERIAL NUMBERS	SERIAL NUMBERS	SERIAL NUMBERS
_____ thru _____	_____ thru _____	_____ thru _____
_____ thru _____	_____ thru _____	_____ thru _____
_____ thru _____	_____ thru _____	_____ thru _____
_____ thru _____	_____ thru _____	_____ thru _____
_____ thru _____	_____ thru _____	_____ thru _____
_____ thru _____	_____ thru _____	_____ thru _____
Total No. Boat Liveries Inspected:		Total Fees Collected: \$
TYPE OF WATERCRAFT INSPECTED	TOTAL NUMBER	
	TAGGED & APPROVED	NOT APPROVED
CANOES	_____	_____
JET SKIS	_____	_____
KAYAKS	_____	_____
MOTOR BOATS	_____	_____
PONTOON BOATS	_____	_____
ROW BOATS	_____	_____
SAIL BOATS	_____	_____
Comments		

Inspector (County sheriff dept.) Please print _____ Title _____ Signature _____ Date _____

Send this completed *Summary* to the following
address **no later than September 30th** to:

**MARINE SAFETY PROGRAM
GRANTS MANAGEMENT
MICHIGAN DEPARTMENT OF NATURAL RESOURCES
PO BOX 30425
LANSING MI 48909-7925**